

<i>SERFF Tracking Number:</i>	<i>PHXN-125852163</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Hallmark Insurance Company of Texas</i>	<i>State Tracking Number:</i>	<i>#? \$25</i>
<i>Company Tracking Number:</i>	<i>HO-AR102008AOI</i>		
<i>TOI:</i>	<i>04.0 Homeowners</i>	<i>Sub-TOI:</i>	<i>04.0003 Owner Occupied Homeowners</i>
<i>Product Name:</i>	<i>Homeowners</i>		
<i>Project Name/Number:</i>	<i>Expanded Dwelling Limits/HO-AR102008AOI</i>		

Filing at a Glance

Company: American Hallmark Insurance Company of Texas

Product Name: Homeowners

SERFF Tr Num: PHXN-125852163 State: Arkansas

TOI: 04.0 Homeowners

SERFF Status: Closed

State Tr Num: #? \$25

Sub-TOI: 04.0003 Owner Occupied

Co Tr Num: HO-AR102008AOI

State Status: Fees verified

Homeowners

Filing Type: Rate/Rule

Co Status:

Reviewer(s): Becky Harrington,
Betty Montesi

Author: Ron Temposky

Disposition Date: 10/10/2008

Date Submitted: 10/09/2008

Disposition Status: Filed

Effective Date Requested (New): 10/29/2008

Effective Date (New): 10/29/2008

Effective Date Requested (Renewal): 10/29/2008

Effective Date (Renewal):

10/29/2008

State Filing Description:

General Information

Project Name: Expanded Dwelling Limits

Status of Filing in Domicile: Authorized

Project Number: HO-AR102008AOI

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 10/10/2008

State Status Changed: 10/10/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

This filing introduces additional dwelling limit factors beyond the \$20,000-\$100,000 range currently available in the American Hallmark Insurance Company of America ("Hallmark") Homeowners program. In an attempt to broaden market reach, Hallmark is submitting amount of insurance factors for dwelling limits up to \$200,000. These factors apply to forms HO-2 and HO-3.

SERFF Tracking Number: PHXN-125852163 State: Arkansas
Filing Company: American Hallmark Insurance Company of Texas State Tracking Number: #? \$25
Company Tracking Number: HO-AR102008AOI
TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners
Product Name: Homeowners
Project Name/Number: Expanded Dwelling Limits/HO-AR102008AOI

Company and Contact

Filing Contact Information

Ron Temposky, Product Manager rtemposky@phoenixautoins.com
14651 Dallas Parkway (972) 866-5742 [Phone]
Dallas, TX 75254 (972) 788-0520[FAX]

Filing Company Information

American Hallmark Insurance Company of CoCode: 43494 State of Domicile: Texas
Texas
14651 Dallas Parkway Group Code: 3478 Company Type: Property &
Casualty
Suite 400
Dallas, TX 75254 Group Name: Hallmark Insurance State ID Number:
Group
(972) 934-2400 ext. 5762[Phone] FEIN Number: 75-1817901

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

SERFF Tracking Number: *PHXN-125852163* *State:* *Arkansas*
Filing Company: *American Hallmark Insurance Company of Texas* *State Tracking Number:* *#? \$25*
Company Tracking Number: *HO-AR102008AOI*
TOI: *04.0 Homeowners* *Sub-TOI:* *04.0003 Owner Occupied Homeowners*
Product Name: *Homeowners*
Project Name/Number: *Expanded Dwelling Limits/HO-AR102008AOI*

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	10/10/2008	10/10/2008

SERFF Tracking Number: *PHXN-125852163* *State:* *Arkansas*
Filing Company: *American Hallmark Insurance Company of Texas* *State Tracking Number:* *#? \$25*
Company Tracking Number: *HO-AR102008AOI*
TOI: *04.0 Homeowners* *Sub-TOI:* *04.0003 Owner Occupied Homeowners*
Product Name: *Homeowners*
Project Name/Number: *Expanded Dwelling Limits/HO-AR102008AOI*

Disposition

Disposition Date: 10/10/2008
Effective Date (New): 10/29/2008
Effective Date (Renewal): 10/29/2008
Status: Filed
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PHXN-125852163 State: Arkansas

Filing Company: American Hallmark Insurance Company of Texas State Tracking Number: #? \$25

Company Tracking Number: HO-AR102008AOI

TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners

Product Name: Homeowners

Project Name/Number: Expanded Dwelling Limits/HO-AR102008AOI

Item Type	Item Name	Item Status	Public Access
Supporting Document	HPCS-Homeowners Premium Comparison Survey	Filed	Yes
Supporting Document	NAIC loss cost data entry document		Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp		Yes
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	Filing Memo	Filed	Yes
Rate	Expanded Dwelling Limit Factors	Filed	Yes

<i>SERFF Tracking Number:</i>	<i>PHXN-125852163</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Hallmark Insurance Company of Texas</i>	<i>State Tracking Number:</i>	<i>#? \$25</i>
<i>Company Tracking Number:</i>	<i>HO-AR102008AOI</i>		
<i>TOI:</i>	<i>04.0 Homeowners</i>	<i>Sub-TOI:</i>	<i>04.0003 Owner Occupied Homeowners</i>
<i>Product Name:</i>	<i>Homeowners</i>		
<i>Project Name/Number:</i>	<i>Expanded Dwelling Limits/HO-AR102008AOI</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number:	PHXN-125852163	State:	Arkansas
Filing Company:	American Hallmark Insurance Company of Texas	State Tracking Number:	#? \$25
Company Tracking Number:	HO-AR102008AOI		
TOI:	04.0 Homeowners	Sub-TOI:	04.0003 Owner Occupied Homeowners
Product Name:	Homeowners		
Project Name/Number:	Expanded Dwelling Limits/HO-AR102008AOI		

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Expanded Dwelling Limit Factors		New	Exhibit - Expanded AOI Curve.pdf

Expanded Amount of Insurance Factors

Amount of Insurance	Home Factor
100,000	1.000
101,000	1.012
102,000	1.024
103,000	1.036
104,000	1.048
105,000	1.060
106,000	1.072
107,000	1.084
108,000	1.096
109,000	1.108
110,000	1.120
111,000	1.132
112,000	1.144
113,000	1.156
114,000	1.168
115,000	1.180
116,000	1.192
117,000	1.204
118,000	1.216
119,000	1.228
120,000	1.240
121,000	1.252
122,000	1.264
123,000	1.276
124,000	1.288
125,000	1.300
126,000	1.312
127,000	1.324
128,000	1.336
129,000	1.348
130,000	1.360
131,000	1.372
132,000	1.384
133,000	1.396
134,000	1.408
135,000	1.420
136,000	1.432
137,000	1.444
138,000	1.456
139,000	1.468
140,000	1.480
141,000	1.492
142,000	1.504
143,000	1.516
144,000	1.528
145,000	1.540
146,000	1.552
147,000	1.564
148,000	1.576
149,000	1.588
150,000	1.600

Amount of Insurance	Home Factor
151,000	1.612
152,000	1.624
153,000	1.636
154,000	1.648
155,000	1.660
156,000	1.672
157,000	1.684
158,000	1.696
159,000	1.708
160,000	1.720
161,000	1.732
162,000	1.744
163,000	1.756
164,000	1.768
165,000	1.780
166,000	1.792
167,000	1.804
168,000	1.816
169,000	1.828
170,000	1.840
171,000	1.852
172,000	1.864
173,000	1.876
174,000	1.888
175,000	1.900
176,000	1.912
177,000	1.924
178,000	1.936
179,000	1.948
180,000	1.960
181,000	1.972
182,000	1.984
183,000	1.996
184,000	2.008
185,000	2.020
186,000	2.032
187,000	2.044
188,000	2.056
189,000	2.068
190,000	2.080
191,000	2.092
192,000	2.104
193,000	2.116
194,000	2.128
195,000	2.140
196,000	2.152
197,000	2.164
198,000	2.176
199,000	2.188
200,000	2.200

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Company Tracking Number: HO-AR102008AOI
TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners
Product Name: Homeowners
Project Name/Number: Expanded Dwelling Limits/HO-AR102008AOI

Supporting Document Schedules

		Review Status:	
Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Filed	10/10/2008

Comments:

Attachment:

P&C Transmittal Doc.pdf

		Review Status:	
Satisfied -Name:	Filing Memo	Filed	10/10/2008

Comments:

Attachment:

Filing Memorandum.pdf

Property & Casualty Transmittal Document

Reset Form

**1. Reserved for Insurance
Dept. Use Only****2. Insurance Department Use only**

a. Date the filing is received:

b. Analyst:

c. Disposition:

d. Date of disposition of the filing:

e. Effective date of filing:

New Business

Renewal Business

f. State Filing #:

g. SERFF Filing #:

h. Subject Codes

3. Group Name	American Hallmark Ins Co of TX				Group NAIC #	3478-43494
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #		
American Hallmark Ins Co of TX	Texas	3478-43494	75-1817901			

5. Company Tracking Number	HO-AR102008AOI
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Ron Temposky 14651 Dallas Parkway, Suite 400 Dallas, Texas 75254	Product Manager	972-866-5742	972-788-0520	rtemposky@hallmarkgrp.com
7. Signature of authorized filer				
8. Please print name of authorized filer		Ron Temposky		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	04.0 Homeowners			
10. Sub-Type of Insurance (Sub-TOI)	04.0003 Owner Occupied Homeowners			
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]				
12. Company Program Title (Marketing title)	Residential Property Program			
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)			
14. Effective Date(s) Requested	New:	10/29/08	Renewal:	10/29/08
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
16. Reference Organization (if applicable)				
17. Reference Organization # & Title				
18. Company's Date of Filing	10/9/08			
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	HO-AR102008AOI
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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This filing introduces additional dwelling limit factors beyond the \$20,000-\$100,000 range currently available in the American Hallmark Insurance Company of America ("Hallmark") Homeowners program. In an attempt to broaden market reach, Hallmark is submitting amount of insurance factors for dwelling limits up to \$200,000. These factors apply to forms HO-2 and HO-3.

[View Complete Filing Description](#)

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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Check #:
Amount:

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #				
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	HO-AR102008AOI
2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
<input type="checkbox"/> Rate Increase <input type="checkbox"/> Rate Decrease <input checked="" type="checkbox"/> Rate Neutral (0%)		

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)							File and Use
4a.	Rate Change by Company (As Proposed)							
Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)	
American Hallmark Ins Co o	n/a	n/a	0	0	0	0%	0%	
4b.	Rate Change by Company (As Accepted) For State Use Only							
Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change	

5. Overall Rate Information (Complete for Multiple Company Filings only)			
		COMPANY USE	STATE USE
5a	Overall percentage rate indication (when applicable)	n/a	
5b	Overall percentage rate impact for this filing	0%	
5c	Effect of Rate Filing – Written premium change for this program	0	
5d	Effect of Rate Filing – Number of policyholders affected	0	

6.	Overall percentage of last rate revision	n/a
7.	Effective Date of last rate revision	n/a
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	n/a

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

FILING MEMORANDUM

American Hallmark Insurance Company of Texas Expanded Amount of Insurance Factors

This filing introduces additional dwelling limit factors beyond the \$20,000-\$100,000 range currently available in the American Hallmark Insurance Company of America (“Hallmark”) Homeowners program. In an attempt to broaden market reach, Hallmark is submitting amount of insurance factors for dwelling limits up to \$200,000. These factors apply to forms HO-2 and HO-3.